PATE 10 ANDS

## CONLEY ROSE

A Professional Corporation

DALLAS OFFICE

GRANITE PARK TWO
5700 GRANITE PARKWAY, SUITE 330
PLANO, TEXAS 75024-6616

(972) 731-2288 Facsimile (972) 731-2289

December 1, 2005

2005 PEC - 1 Fil 3: 11

US PATETT & TRADELIARK
HOUSTON OFFICE
(713) 238-8000

AUSTEN OFFICE (512) 391-1900

Writer's Direct Dial: (972) 731-2270 jbrown@dfw.omleyrosc.com

WWW.CONLHYROSE.COM

Via Facsimile 571-273-6500

INTELLECTUAL PROPERTY LAW

INCLUDING PATENTS, TRADEMARKS, COPYRIGHTS AND UNFAIR COMPETITION

United States Patent and Trademark Office Attn: Refund Branch PO Box 1450 Alexandria, VA 22313-1450

Re:

Our File No.:

4017-03001

Application No.:

09/954,976

Deposit Account No.: 501515

Dear Sir:

A recent review of our November statement for Deposit Account No. 501515 shows an entry which we believe is in error.

On October 12, 2005 we filed a Notice of Appeal and Petition for Extension of Time via first class mail. The appropriate petition for the extension was filed along with the Notice of Appeal. A check in the amount of \$475.00 to cover the fee for the appeal notice (\$250) and the two month extension (\$225) was enclosed. The box for "A check in the amount of the fee is enclosed" was inadvertently left blank. A copy of the check and supporting documents as filed, is enclosed.

We therefore respectfully request a refund of \$225.00. Please credit this to our Deposit Account 501515. If you have any questions regarding this request, please feel free to contact me.

Thank you for your assistance.

Adjustment date:

date: 12/30/2005 FEKUBAYI

BAY1 15 099:

09954976

225.00 CR

12/30/2005 EEKUBAY1 00000003 09954976

01 FC:2252

225.00 OP

Sincerely,

CONLEY ROSE, P.C.

Jean E. Brown

Legal Assistant to Michael S. Bush

31551-01/4017-03001

PAGE 2/5 \* RCVD AT 12/1/2005 2:59:14 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/28 \* DNIS:2736500 \* CSID:9727312289 \* DURATION (mm-ss):01-20

applicant/inventor.

(Form PTO/58/96)

attorney or agent of record. Registration number \_

assignee of record of the entire interest.

attorney or agent acting under 37 CFR 1.34. Registration number if soting under 37 CFR 1.34.

See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.

Signature

Michael S. Bush

Typed or printed name

972/731-2288 Telephone number

October 12, 2005

P. Ø4

PTO/S8/31 (09-04)

U.S. Palem and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Peperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMB control number. Docket Number (Optional) NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES 4017-03001 I hereby carlily that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1460" IST CPR 1.8(e)]
on October 12 2005 In re Application of Surendra N. Naldoo Application Number Filed 09/954,976 September 18, 2001 Signature\_ FOR VIDEO SECURITY SYSTEM Typed or printed Art Unit 2613 Examiner Tung T. Vo Jean Brown name\_ Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) 500.00 Applicant claims small emity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: 260.00 A check in the amount of the fee is enclosed. Payment by credit card, Form PTQ-2038 is attached. The Director has stready been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. A petition for an extension of time under 37 CFR 1.138(a) (PTO/SB/22) is enclosed. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038, I am the

| . [ | NOTE: Signatures of all the inventors or easignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |  |                |  |  |
|-----|---|--|----------------|--|--|
| 2   | *Total of 1   | forms are submitted.   |                |  |  |
| Thi | s collection of information is re   | required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the nubble which is to file few | Churcha (1997) |  |  |

This conscion of enormation is required by 37 UFR 41.31. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commercial the amount of time you require to complete this form analysis suggestions for reducing this burden, should be sent to the Chief Information Oracer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patentia, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9189 and select option 2.

PAGE 4/5 \* RCVD AT 12/1/2005 2:59:14 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/28 \* DNIS:2736500 \* CSID:9727312289 \* DURATION (mm-ss):01-20

DEC-01-2005 14:03

CONLEY & ROSE PC

9727312289

\$475.00

P.03

VENDOR:

OUR REF. NO. | YOUR INVOICE NUMBER | INVOICE DATE | INVOICE AMOUNT | AMOUNT PAID | DISCOUNT TAKEN |

10/11/05

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

4017-03001 Notice of Appeal and Two Month Extension Fee

7496

CONLEY ROSE, P.C. 5700 GRANITE PARKWAY SUITE 330 PLANO, TX 75024 PH. 972-731-2288 FROST NATIONAL BANK HOUSTON, TEXAS 77024 30-9-1140

CHECK NO.

CHECK DATE

VENDOR NO.

7496

10/11/05 CHECKAMOUNT

Four-hundred seventy-five dollars and NO/100 -

#007496# #114000093#

<del>------</del> \$475.00

TO THE ORDER Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Jung Stall

CONLEY ROSE, P.C.

7496

VENDOR:

CUR RES NO. YOUR INVOICE NUMBER INVOICE DATE INVOICE AMOUNT AMOUNT PAID DISCOUNT TAKEN

10/11/05

\$475.00

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

4017-03001

Notice of Appeal and Two Month Extension Fee

PAGE 3/5 \* RCVD AT 12/1/2005 2:59:14 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/28 \* DNIS:2736500 \* CSID:9727312289 \* DURATION (mm-ss):01-20

| 20-81-2005 14:04 CONLEY & RO   | SEPC  | <b>;</b>   | 9727312289 F  |  |  |  |
|--|---|--|---|--|--|--|
| Under the paperwork Reduction Act of 1995, no pe   | Patent and Tri  | Approve : use ( idemark Office: U. ion of information unli | hrough 07/31/2006. OMB 0651. S. DEPARTMENT OF COMME |  |  |  |
| PETITION FOR EXTENSION OF TIME   | UNDER 37 CFR 1.136  | (a)  | Docket Number (Optional)<br>4017-03001              |  |  |  |
|  | In re Application of: Suren   | dra N. Naidoo e  |   |  |  |  |
|  | Application Number: 09/969,521  For: Video Security System                      |  | Filed: September 18, 200                            |  |  |  |
|  |   |  |   |  |  |  |
|  | Group Art Unit: 2613  |  | o, Tung T.  |  |  |  |
| This is a request under the provisions of 37 CFR 1. application.   | 136(a) to extend the period   | for filing a resp  | ouse in the above identifie                         |  |  |  |
| The requested extension and appropriate non-small-   | entity fee are as follows (che  | ck time period   | desired):   |  |  |  |
| One month (37 CFR 1.17(a)(1))  | ; <b>s</b>  |  |   |  |  |  |
| Two months (37 CFR 1.17(a)(2))   | \$225.00  |  | 00  |  |  |  |
| ☐ Three months (37 CFR 1.17(a)(3))   |   | \$   |   |  |  |  |
| Four months (37 CFR 1.17(a)(4))  |   | · <b>s</b>   |   |  |  |  |
| Five months (37 CFR 1.17(a)(5))  |   | ·<br>• <b>S</b>  |   |  |  |  |
| Applicant claims small entity status. So is reduced by one-half, and the resulting A check in the amount of the fee is enclosed. | be fee amount s   | bowп above   |   |  |  |  |
| Payment by credit card. Form PTO-203   | 8 is attached.  |  |   |  |  |  |
| The Director is hereby authorized to char<br>credit any overpayment, to Deposit According  | he Director has already been authorized to charge fees in this application to a |  |   |  |  |  |
| I am the applicant/inventor  |   | ,  |   |  |  |  |
| assignee of record of the entire Statement under 37 CFR 3.   | interest. See 37 CFR 3.71<br>73(b) is enclosed. (Form PT)                       | D/CD/DC)   |   |  |  |  |
| attorney or agent of record.  attorney or agent under 37 CFR Registration number if acting under                                 | 1.34(a)   |  | 45  |  |  |  |
| WARNING: Information on this form may<br>On this form, Provide credit card information   | ha come public. Condition   |  | should not be included                              |  |  |  |
| October 12, 2005   | This  | 12-  |   |  |  |  |
| Date   |   |  |   |  |  |  |
| TP. Simply of Mark   | Michael S. Bush Typed or Printed Na.  | me :   |   |  |  |  |
| TE: Signatures of all the inventors or assignees of record in if more than one signature is required, see below.                 | of the entire interest or their rep   | resentative(s) are   | required. Submit multiple                           |  |  |  |
| Total of forms are submitted   |   |  |   |  |  |  |

PAGE 5/5 \* RCVD AT 12/1/2005 2:59:14 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/28 \* DNIS:2736500 \* CSID:9727312289 \* DURATION (mm-ss):01:20 P. PS

## FAX TRANSMITTAL COVER SHEET

US PARE T & TRODE MARK

CONLEY ROSE, P.C. 5700 Granite Parkway, Suite 330 Plano, Texas 75024-6616

Telephone Number: (972) 731-2288 Fax Number: (972) 731-2289

## PLEASE DELIVER THE FOLLOWING PAGES IMMEDIATELY TO:

NAME:

USPTO

Refund Branch

FAX:

571-273-6500

FROM:

Jean Brown

Legal Assistant to Michael S. Bush

DATE:

December 1, 2005

RE:

Refund Request for Deposit Account 501515

Total Number of Pages (Including Cover Page):

5

REMARKS:

## IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL IMMEDIATELY

This facsimile and the information it contains is intended to be a confidential communication only to the person or entity to whom it is addressed. If you have received this facsimile in error, please notify us by telephone at the above telephone number and return the original to this office by mail.

31539.01/4044.00200

PAGE 1/5 \* RCVD AT 12/1/2005 2:59:14 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/28 \* DNIS:2736500 \* CSID:9727312289 \* DURATION (mm-ss):01-20